

**Michigan Department of Consumer & Industry Services**  
**LIQUOR CONTROL COMMISSION**  
7150 Harris Drive, P.O. Box 30005 – Lansing, Michigan 48909-7505

**WINE/MIXED SPIRIT DRINK WHOLESALERS MONTHLY REPORT**

Name:	License No.	Date Reported (month-year)
Address (street and city):	Business Phone: <div style="text-align: center;">(        )</div>	

**INSTRUCTIONS:**

**WHO MUST FILE:** All wholesalers who receive wine or mixed spirit drinks from an Outstate Seller of Wine, an Outstate Seller of Mixed Spirit Drink, or a Mixed Spirit Drink Manufacturer.

1. This report must be filed on or before the 15<sup>th</sup> day of each month for all sales for the preceding month.  
THIS REPORT MUST BE FILED EVEN IF NO TRANSACTIONS HAVE OCCURRED.
  
2. Enter heading information requested above.
  
3. Attach copies of all invoices for WINE & MIXED SPIRIT DRINKS received from an Outstate Seller of Wine, or an Outstate Seller of Mixed Spirit Drink Manufacturer.  
YOU MUST SEPARATE THE TWO TYPES OF INVOICES.

**PLEASE COMPLETE THE FOLLOWING INFORMATION:**

\_\_\_\_\_ Total number of invoices being submitted.

Check here if no Wine transactions this month \_\_\_\_\_.

Check here if no Mixed Spirit Drink transactions this month \_\_\_\_\_.

**Wine or Mixed Spirit Drinks purchased from a Michigan Wholesaler or a Michigan Winery do not have to be reported.**

**WARNING:** Licensees who fail to submit a required report, or who file a false report, may have their license suspended or revoked.

I declare that the information contained in this report is correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Authorized Agent